

**MANSFIELD TOWNSHIP RECREATION ANNOUNCES
2015 SUMMER JUNIOR TENNIS PROGRAM**

WHERE: Public tennis courts on Port Murray Road, across from Comcast.

WHO: Children ages 5-12 interested in learning to play tennis! **Plus free T-Shirt. *1/season**

PROGRAM: Jonathan Rosenblum, USTA certified coach. Experienced tennis instructor.

EQUIPMENT NEEDED: tennis racket, smooth-soled sneakers, water bottle.

DAYTIME ONLY!

I ---- July 13th, 14th, 15th & 16th

II ---July 20th, 21st, 22nd & 23rd

Monday thru Thursday

(Ages 5 & 6) ---9:30- 10:00

(Ages 7-9) ---10:00-11:00

(Ages 10-12) ---11:00-12:00

EVENINGS ONLY!

***(Rain date: Fridays)**

III--- July 27th, 28th, 29th & 30th

(Ages 5 & 6) --- 5:00-5:30

(Ages 7 - 9) --- 5:30 - 6:30

IV----Aug. 3rd, 4th, 5th & 6th

(Ages 10 - 12) - 6:30 - 7:30

COST

Ages 5 & 6 = \$17/**week** per child

Ages 7 - 12 = \$32/**week** per child

PLUS \$10 PER CHILD FOR INSURANCE

***Class size limit: 8-10 per class**

****If the weather looks questionable, please call at Jonathan @ (908)797-3132**

PLEASE SEND FORM AND MAKE CHECKS PAYABLE TO: MANSFIELD TOWNSHIP

RECREATION, 100 Port Murray Road, Port Murray NJ 07865.

-----**Registration Form Below. *Mail to Township Address above* (Keep top part)**-----

Detach and mail with check to Township Bldg., address above. T-Shirt size, childs Sm,M or L

Child's Name: _____ Age: __ Time: _____ Size _____

Child's Name: _____ Age: __ Time: _____ Size _____

Child's Name: _____ Age: __ Time: _____ Size _____

Address: _____

Emergency Phone# _____ **Email** _____

Medical Concerns (Allergies,etc) _____

Clinic Fees _____ **(plus) + \$10 per child Insurance Fee** _____ **Total enclosed** _____

I agree to allow my minor child/children, listed above, to participate in the 2015 Summer Junior Tennis Program. I agree to release, discharge and hold harmless Mansfield Township, the Board of Recreation Commissioners, its officers, volunteers and staff. It is agreed that the accident insurance provided by Mansfield is excess coverage and not primary insurance, which shall be provided by the participant. In the event a claim is made to the excess insurance coverage, it shall be subject to a \$100 deductible per claim.

Parent / Guardian Signature

Printed Name